

# Wisconsin Medicaid update and BadgerCare

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## Wisconsin Medicaid and BadgerCare Information for Providers

To:  
Family Planning  
Clinics  
HMOs and Other  
Managed Care  
Programs

## Procedure code changes for family planning clinics

For dates of service on and after September 1, 2001, Wisconsin Medicaid will cover two additional family planning services procedure codes and will discontinue coverage of three codes as listed in this *Update*.

### Family planning clinic procedure code changes

Effective for dates of service on and after September 1, 2001, Wisconsin Medicaid will cover the following two additional *Current Procedural Terminology* (CPT) codes for family planning clinics:

- 86592 (Type of service [TOS] code 5) — Syphilis test; qualitative (eg, VDRL, RPR, ART).
- 87591 (TOS code 5) — Infectious agent detection by nucleic acid (DNA or RNA); neisseria gonorrhoeae, amplified probe technique.

In addition, for dates of service on and after September 1, 2001, Wisconsin Medicaid will discontinue coverage of the three CPT codes listed below for family planning clinics:

- 57520 (TOS codes 2, 7) — Conization of cervix, with or without fulguration, with or without dilation and curettage, with or without repair; cold knife or laser.
- 74740 (TOS codes 4, Q, U) — Hysterosalpingography, radiological supervision and interpretation.
- 76076 (TOS codes 4) — Dual energy x-ray absorptiometry (DEXA), bone density study, one or more sites; appendicular skeleton (peripheral) (eg, radius, wrist, heel).

Wisconsin Medicaid will no longer cover these procedure codes as family planning services, because these codes have not been billed by family planning clinics in the past three years. Family planning clinics should refer recipients to other Medicaid providers, such as primary care physicians, to receive these services.

This *Update* contains Medicaid fee-for-service policy and applies to providers of services to recipients on fee-for-service Medicaid only. For Medicaid HMO or managed care policy, contact the appropriate managed care organization. Wisconsin Medicaid HMOs are required to provide at least the same benefits as those provided under fee-for-service arrangements.

The *Wisconsin Medicaid and BadgerCare Update* is the first source of program policy and billing information for providers.

Although the *Update* refers to Medicaid recipients, all information applies to BadgerCare recipients also.

Wisconsin Medicaid and BadgerCare are administered by the Division of Health Care Financing, Wisconsin Department of Health and Family Services, P.O. Box 309, Madison, WI 53701-0309.

For questions, call Provider Services at (800) 947-9627 or (608) 221-9883 or visit our Web site at [www.dhfs.state.wi.us/medicaid/](http://www.dhfs.state.wi.us/medicaid/).